



WASHINGTON STATE GAMBLING COMMISSION
LOCATION: 4565 7th Avenue SE, Lacey WA 98503
MAILING ADDRESS: P.O. Box 42400, Olympia WA 98504-2400
TELEPHONE: 360-486-3440 / FAX NUMBER: 360-486-3631
TOLL-FREE: 1-800-345-2529 / TDD: 360-486-3637
WEB SITE: www.wsgc.wa.gov

ADDITIONS, CHANGES, AND / OR DELETIONS TO ITINERARY
FOR LICENSE TO OPERATE AMUSEMENT GAMES AT SPECIAL LOCATIONS

Organization Name: _____ () - _____
Telephone

Mailing Address: _____
Street or P.O. Box City State Zip

ITINERARY

<u>Activity</u>	<u>Inclusive Dates</u>
•Name or Type of Event: _____	From: _____
Location Address: _____ Street City	To: _____
Justification for Change: _____	
•Name or Type of Event: _____	From: _____
Location Address: _____ Street City	To: _____
Justification for Change: _____	
•Name or Type of Event: _____	From: _____
Location Address: _____ Street City	To: _____
Justification for Change: _____	
•Name or Type of Event: _____	From: _____
Location Address: _____ Street City	To: _____
Justification for Change: _____	

THIS STATEMENT MUST BE SIGNED BY THE PRINCIPAL OWNER OR HIGHEST RANKING OFFICER OF LICENSEE ORGANIZATION

I hereby certify that the provisions of WACs 230-13-005, 230-13-150, 230-13-155 have been met in accordance with RCW 9.46.0331.

I further certify that proper notification has been given to each local law enforcement agency as required by WAC 230-13-070 and all games being operated meet requirements of Commission rules including WACs 230-13-015 through 230-13-065.

Signature of Principal Owner **OR** Highest Ranking Officer Date

APPROVED, EXCEPT FOR THOSE AREAS LINED OUT IN RED.

Signature of Approving Authority Date If Any Question, Please Contact Above Person

Addition to _____ full season itinerary for amusement games.